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1: Acta Diabetol. 1995 Dec;32(4):251-6.

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Apolipoprotein AI-CIII-AIV genetic polymorphisms and coronary heart disease in type 2 diabetes mellitus.**Rigoli L, Raimondo G, Di Benedetto A, Romano G, Porcellini A, Campo S, Corica F, Riccardi G, Squadrito G, Cucinotta D.**

Department of Internal Medicine, University of Messina, Italy.

The aim of this study was to verify whether or not the increased prevalence of coronary heart disease (CHD) commonly observed in patients with type 2 diabetes mellitus is related to a genetic background involving restriction fragment length polymorphisms (RFLPs) of apolipoproteins. On the basis of a case-control design, 62 type 2 diabetic patients with CHD (confirmed by clinical history and electrocardiogram) and 62 age- and sex-matched diabetic subjects without CHD were enrolled. In each of them RFLPs of the apolipoprotein CIII gene (S1 or S2 allele) and AI promoter region (A or G allele), together with fasting plasma lipids and apolipoproteins levels, were assessed. The rare S2 allele was found significantly ($P = 0.05$) more frequently in patients with CHD, and its related S1S2 genotype was associated with higher plasma levels of total cholesterol ($P = 0.01$), triglycerides ($P = 0.007$) and apo B ($P = 0.001$) than the S1S1 genotype. The A allele was more frequent ($P = 0.004$) in patients without CHD and was associated with lower plasma cholesterol ($P = 0.0001$), low-density lipoprotein (LDL)-cholesterol ($P = 0.0001$) and apo B ($P = 0.005$). The S1/A haplotype was more frequent ($P = 0.05$) in patients without CHD and was associated with the lowest plasma lipid levels. These results suggest that genetic factors, related to the apo AI-CIII-AIV gene cluster, could play a role in the development of CHD in type 2 diabetic patients, probably through modification of their plasma lipid pattern.

PMID: 8750764 [PubMed - indexed for MEDLINE]

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